DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: COUNTRY HEARTS (390146)

Address: N2767 HWY 89, FORT ATKINSON, WI 53538

License Status: REGULAR

Licensed/Certified/Registered 10/29/1996

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0093183 End Date: 08/16/2004 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008041 Served 08/24/2004

Deficiencies Cited Subject Area Subject Area Verified

50.065(2)(b)intro ENTITY BACKGROUND CHECK REQUIREMENTS

88.04(2)(h) COMPLY WITH OSHA

88.05(4)(b)1 FIRE SAFETY-SMOKE DETECTORS 88.07(3)(e)1 MEDICATION- RECORD KEEPING

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